POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	Cas	659	04-03-01
RESPONSE FORMALITY REVIEW	7		

INDEX OF CLAIMS

,	Rejected	N	Non-elected
	Allowed	1	Interference
	(Through numeral) Canceled	Α	Appeal
	Restricted	0	Objected

Ţ		5-11
Claim Date	Claim Date	Claim Date
= 9 0 1 2	Original Original	Pinal Original
Pinal	Pinal O Origin	
112	51 V V	101
2	52	102
3	53	103
4	54	104
5	55	105
. 6	56	106
7 7 1	57	107
8	58	108
9	59 ,	109
10	60 9	110
11	61	111
12	62	112
13	63	113
14	64	114
15	65	115
16	66	116
17	67	117
18	68	118
19	69	119
20	70	120
	71	121
22	72	122
23	73	123
24	74	124
25	75	125
26	76	126
25	77	127
28	78	128
29	79	129
360	80	130
31	81	131
32	82	132
33	83	133
34	84	134
35	85	135
36	86	136
87	87	137
	88	138
39	89	139
100	90	140
(4) VV	91	141
42	92	142
43	93	143
44	94	144
45	95	145
46	96	146
47	97	147
48	98	148
49	99	149
50	100	150

If more than 150 claims or 10 actions staple additional she t her